						Application or Docket Number								
	PATENT A		CATIO ffective			09	14	670	147					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL TYPE		NTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	Π	FEE		RATE	FEE
BASIC FEE									د. ه وريان	Ŗ.	345.00	OR		690.00
TOTAL CLAIMS			5° / minus 20=			34			X\$ 9=	-		OR	X\$18=	6/2
INDEPENDENT CLAIMS			minus 3 = :			: 2			X39=		OR	X78=	150	
MULTIPLE DEPENDENT CLAIM PRESENT						Ì	+130=		OR	+260=				
* If the difference in column 1 is less than zero, enter "0" in column 2								l	TOTA	-		OR	TOTAL	1418
CLAIMS AS AMENDED - PART II													OTHER	
(Column 1) (Column 2) (Column 3)							_	SMAL	L E	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		REM/ AF	AIMS AINING TER DMENT		PR	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	. 4	54	Minus	••	54	=		X\$ 9=	=		OR	X\$18=	
	Independent	•	5	Minus ·	***	5	=-6		X39=			OR	X78=	
	FIRST PRESE	NTATIO	N OF M	ULTIPLE DEF	PEND	ENT CLAIM		ı	+130=			OR	+260=	·
										AL		OR	TOTAL	
			43) a le como (0)	(Calumn 2)		ADDIT. F	EE		Un	ADDIT. FEE	
-	randii vii saan ka		umn 1) AIMS	No. 92 Peach		Column 2) HIGHEST	(Column 3)	F	, , ,	_	ADDI-	1		ADDI-
AMENDMENT B		AF	AINING TER IDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE
	Total	• 4	54	Minus	••	54	=		X\$ 9	=		OR	X\$18=	
	Independent	•	9	Minus	•••		=4		X39=			OR	¥78±	344
	FIRST PRESE	NTATIC	N OF M	ULTIPLE DEI	PENL	DENT CLAIM			+130=	_		OR	+260=	
								•	TOT ADDIT. F			OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												•		
AMENDMENT.C		CL REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	54	Minus		54	= -		X\$ 9=			OR	X\$18=	
	Independent	·	9	Minus	•••	(-0		X39=	7			X78=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									\dashv		OR		
+ If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												OR	+260=	
•••	f the entry in colui If the "Highest Nui If the "Highest Nu The "Highest Nur	mber Pre	viously Paviously P	aid For IN THI aid For IN THI	S SPA	ACE is less tha ACE is less tha	n 20, enter "20." n 3, enter "3."	•	TOT ADDIT. Fl and in the	EE	propriate bo	OR x in co	TOTAL TOTAL TIDOA 1. nmuk	